



SENIOR MEDICAL PATROL PROGRAM

SMP Program Today

The SMP Program includes 54 project grants in all states, the District of Columbia, Puerto Rico, Guam and the U.S. Virgin Islands. SMP projects have made great progress in recruiting and training volunteers of all ages on Medicare errors, fraud and abuse. These volunteers empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report health care fraud, errors, and abuse through outreach, counseling, and education.

SMP projects actively work to disseminate SMP fraud prevention and identification information through the media, outreach campaigns, community events and also working with beneficiaries who present with complex cases such as compromised Medicare numbers. Through these efforts, beneficiaries contact the projects with inquiries and complaints regarding Medicare, Medicaid and other health care or related consumer issues.

Another key role of the SMP project is to address such inquiries and complaints, either by resolving matters directly or by referrals to appropriate entities.

Capturing SMP program activity data, to include tracking and reporting of beneficiary complaints, referrals, savings and other outcomes in the data reporting system is also a key function of the SMP project.

The Office of the Inspector General collects performance measures that is extracted from the SMP projects via the SMP data system (SIRS) annually.

SMP Strategic Program Goals and Objectives

The goal of SMP Project grants is to empower Medicare beneficiaries to prevent health care fraud through outreach, counseling, and education. Program coverage must target vulnerable, hard-to-reach beneficiaries, their families, caregivers, and other consumers.

Applicants under this RFP are required to design and implement strategies to address each of the following SMP Strategic Program Objectives:

Foster program coverage.

Applicants must achieve coverage in their catchment area. Program coverage is defined for this purpose as the capacity to provide service and be available for one-on-one assistance in each area or county within the state. One-on-one assistance can be provided in person or over the phone.

1. Provide high quality beneficiary education and inquiry resolution.
2. Improve the efficiency of the SMP program while increasing results for both operational and quality measures. ACL requires the use of the SMP data system (SIRS) to collect data, track, assess, and measure program performance. Target training and education to isolated and hard-to-reach populations, as well as the general population of Medicare beneficiaries. SMP needs to target vulnerable populations that are traditionally underserved due to isolation, ethnic, cultural, language barriers, socioeconomic or other factors.

New Hampshire Department of Health and Human Services
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Performance Measure (PM)	Definition
7. Medicare Recoveries	Actual and expected Medicare recoveries from criminal actions, settlements, civil judgments, or overpayments that resulted from the referral. This applies to the amount of money that was ordered or agreed upon to be returned to Medicare, and may not reflect actual collections. Recoveries may also involve cases that include participation by a Medicare contractor or a law enforcement agency. This measure includes recoveries associated with a project's referral that resulted in the opening of an investigation or where the SMP made a meaningful contribution to an existing investigation.
8. Additional Expected Medicare Recoveries	Actual and expected Medicare recoveries from criminal actions, settlements, civil judgments, or overpayments that resulted from the referral. This applies to the amount of money that was ordered or agreed upon to be returned to Medicare, and may not reflect actual collections. Recoveries may also involve cases that include participation by a Medicare contractor or a law enforcement agency. This measure includes recoveries associated with a project's referral to an existing investigation where the SMP's information validated existing information. This measure aims to capture additional recoveries in which the SMP was minimally involved.
9. Medicaid Recoveries	Actual and expected Medicaid recoveries from criminal actions, settlements, civil judgments, or overpayments that resulted from the referral. This applies to the amount of money that was ordered or agreed upon to be returned to Medicaid, and may not reflect actual collections. Recoveries may also involve cases that include participation by a Medicaid Fraud Control Unit or a law enforcement agency. This measure includes recoveries associated with a project's referral that resulted in the opening of an investigation or where the SMP made a meaningful contribution to an existing investigation.
10. Additional Expected Medicaid Recoveries	Actual and expected Medicaid recoveries from criminal actions, settlements, civil judgments, or overpayments that resulted from the referral. This applies to the amount of money that was ordered or agreed upon to be returned to Medicaid, and may not reflect actual collections. Recoveries may also involve cases that include participation by a Medicaid contractor or a law enforcement agency. This measure includes recoveries associated with a project's referral to an existing investigation where the SMP's information validated existing information. This measure aims to capture additional recoveries in which the SMP was minimally involved.
11. Savings to Beneficiaries	Money recouped to an individual as a result of the SMP project (e.g., copayments, deductibles, or any other out-of-pocket expenses).
12. Other Savings	Money recouped to an entity other than Medicare, Medicaid, or a beneficiary (e.g., secondary health insurer) as a result of the SMP program.



SMP Performance Measure Definitions and Guidance

This document provides definitions and guidance about the SMP Performance Measures (PMs) to help you accurately report your SMP activities using the SMP Information and Reporting System (SIRS). This guidance will be updated regularly based on SMP questions and feedback.

Performance Measure (PM)	Definition
1. Active SMP Team Members	Individuals who spent any time on the SMP program, including SMP-paid, in-kind paid, and volunteer team members.
2. SMP Team Member Hours	Hours contributed by team members while performing SMP work and receiving training to perform SMP work, including time spent by SMP-paid, in-kind paid, and volunteer team members.
3. Group Outreach and Education Events	Community outreach events, education activities, and presentations to educate beneficiaries, family members, caregivers, and others about SMP services and detecting health care fraud, errors, and abuse.
4. People Reached Through Group Outreach and Education Events	Total estimated number of people reached as a result of SMP group outreach and education activities.
5. Individual Interactions	Individual interactions between SMP team members and beneficiaries, family members, caregivers, or others for the purpose of discussing or gathering information about potential health care fraud, errors, or abuse.
6. Cost Avoidance	Health care expenditures for which the government, a beneficiary, or other entity (e.g., secondary health insurer or a pharmacy) was relieved of responsibility for payment as a result of the SMP program.

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Performance Measure	2017	2018	Change
Total number of active SMP team members	32	50	56%
Total number of SMP team members hours	2,153	2,000	-7%
Number of group outreach and education events	375	439	17%
Estimated number of people reached through group outreach and education events	8,471	15,068	78%
Number of individual interactions with, or on behalf of, a Medicare beneficiary	3,547	5,574	57%
Cost avoidance on behalf of Medicare, Medicaid, beneficiaries or others	\$0	\$0	
Expected Medicare recoveries attributable to the project	\$0	\$0	
Additional expected Medicare recoveries attributable to project	\$0	\$0	
Expected Medicaid recoveries attributable to the project	\$0	\$0	
Additional expected Medicaid recoveries attributable to the project	\$0	\$0	
Savings to the beneficiaries attributable to the project	\$0	\$0	
Other savings attributable to the project (e.g. savings to supplemental insurance)	\$0	\$0	